

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10748764</u>	FILING DATE	
							APPLICANT(S)		
9-6-05							CLAIMS		
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP			
1							51		
2							52		
3							53		
4							54		
5							55		
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42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	2		6				TOTAL IND.		
TOTAL DEP.	18		1				TOTAL DEP.		
TOTAL CLAIMS	20		10				TOTAL CLAIMS		